PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10103565

Effective October 1, 2001								1000 33 00					
		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			09					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			99 minus 20=		. 9			X\$ 9=		OR	X\$18=	162	
INDEPENDENT CLAIMS			6 mir	nus 3 =	3			X42=		OR	X84=	528	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, ente						olumn 2	ı	TOTAL		OR	TOTAL	1154	
7-5-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							_	SMALL	ENTITY	OR	OTHER SMALL I	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	•	NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOM	Total	· 2 9	Minus	 5	3 9	=		X\$ 9=		OR	X\$18=		
AME	Independent	٤.	Minus	***	<u>(1)</u>	<u></u>		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	T CLAIM]	+140=		OR	+280=		
•								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**				X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	= ~	-	4	X42=		OR	X84=	•	
┞	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	*	Minus	**		8		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	TO ALL	<u> -</u>		X42=		OR	X84=		
┡	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=	1	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+20U=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Nur	nber Previously P	aid For (Total o	r Indepen	ident) is th	e highest numb	ber fo	und in the ap	propriate bo	x in ca	oluma 1.	٠	